

PINK CONNECTION

UBF Vol 10 Issue 1: Aug - Oct '23

Krishna Kaur

Virk

The power of
positivity

Aurangabad Caves

An oasis of calm

Dr Abhijit Dam

Giving succour
to the dying



BEHIND The Scenes

There are two worlds, a philosopher says, one where we are healthy and well, and another where we are sick. In the course of our lives, we move unexpectedly, from one world to another. We recover mostly, but sometimes we don't come back from that world of illness.

Recently, a friend who was going through dizzy spells could not find an apparent reason for the same, and despite all the testing, the doctors besides prescribing emergency medicines, couldn't put their finger on its cause. It was then, she went to a mind-body healer who suggested the psychological reason behind her dizziness, it could have been because of her move to another city, when she felt her life was getting out of her control.

It is then I began to think of the correlation between mind and body, and how they talk to each other like two very good friends. The mind may feel there is no limit to what your body can do but one day, the body literally cries out that it needs to rest by manifesting an illness.

On the other hand, reading the stories of our cancer survivors, I see how the mind literally tells the body to heal itself, and go on with its life for the sake of families or for themselves. Karishma Virk speaks of how when she began to think positively, after having the good fortune of coming under Dr Raghu Ram's care, her healing began.

Above all, I am full of admiration for Dr Ushalakshmi garu, who not only fought breast cancer, but also got her son (Dr Raghu Ram) to relocate to India. He had to leave behind his lucrative career opportunities in England and has now become the face of the foundation working over the past 17 years to spread breast cancer awareness. She turned 90 last month, and she continues to inspire.

We, at *Pink Connexion*, wish her well in the coming years.

Ratna Rao Shekar



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PRINTED AT
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Dr Abhijit Dam:

‘Compassion can be more effective than science at times’



He works in the field of palliative care, which is not widely practised in India, as yet. But, Dr Abhijit Dam is not just an ordinary medical doctor. Back in 2005 itself, he set up a hospice Kosish near Bokaro Steel city, to provide pain relief – quality end-of-life care – to terminally ill patients and address their concerns about the mind and spirit. The hospice also trains death doulas, who provide emotional and spiritual support to dying people and their near and dear ones.

Nivedita Choudhuri meets the inspiring Dr Dam

There can be nothing more painful for terminally-ill patients than to die lonely and undignified deaths in hospital ICUs. This is a pain most people will not even begin to comprehend. But, Dr Abhijit Dam does not fall into the category of “most people”.

An anaesthetist by profession, Dr Dam understands the importance of addressing the spiritual and emotional needs of the terminally ill, by providing quality end-of-life care. The concept of end-of-life care, which is not understood by many in India, prioritises the mental and physical comfort of the suffering patient above all else.

Co-founder and director of Kosish – The Hospice – which is situated near Bokaro Steel City, Dr Dam has been pioneering the cause of palliative care among disadvantaged communities in Jharkhand and West Bengal for nearly two decades now. Dr Dam, who completed his MBBS degree from RG Kar Medical College and Hospital in Kolkata, did a post-graduate degree at the All India Institute of Medical Sciences (AIIMS) in New Delhi. He finished his first part exams for the Fellowship of the Royal College of Anaesthetists in the UK in 1996.

Explaining what drew him to palliative care, he says, “I was always drawn to Intensive Care Units (ICUs) and palliative care. I wanted to defeat death... for me, death seemed like a failure of my efforts in intensive care. I have matured over the years though, and I understand how medical treatment can be mostly futile. Sometimes, it only prolongs the process of dying and causes extreme suffering.”

Dr Dam, who is also the head of anaesthetics and pain medicine at Bokaro General Hospital, adds, “Did I want to die in an ICU? The answer was a firm no. I wanted to address the suffering associated with illness rather than focus on the disease only. I wanted to focus on the ‘healing’ and on the suffering and pain patients undergo rather than on the treatment. So, I embraced palliative medicine like a long-lost friend.”

In 2003-'04, the doctor found that palliative care was in its fledgling stage in India. He found that the medical fraternity deal only with illness from the medical point of view, but nothing is done to help patients facing an existential crisis.

“Compassion is sorely lacking in the medical fraternity. Palliative care is more than a medical issue. It is related to the psychological and spiritual aspects of life,” explains Dr Dam.

A confirmed atheist for a long time, he, however, turned to religion to seek support and solace for his patients. He also went to Poland to get a diploma and observe the work of the noted professor Jacek Luczak, founder and medical director of the Palium Hospice in Poznan. He also completed an MSc in palliative medicine for healthcare professionals on a Commonwealth Scholarship from Cardiff University, UK.

Dr Dam then co-founded Kosish, an NGO that provides palliative care services for the terminally ill in rural Jharkhand and West Bengal, in 2005. He recalls that he had chanced upon a piece of land, adjacent to a water body in Obra village in Pindrajhora PS area, near Bokaro.

“This area is largely inhabited by tribal people and borders West Bengal’s Purulia district and the scenic Ajodhya Hills. I took a loan from my Provident Fund to construct a hospice,” he says, claiming that this is the first rural hospice in India.

However, the hospice has only a couple of inmates. “One of them has terminal chronic obstructive pulmonary disease and one is my father, who has many age-related illnesses. Routine admissions are not encouraged. Instead, we provide respite to patients in day-care because we firmly believe home is the best place for people to die in,” he says.

Kosish, housed on a little more than two acres of land, has cared for more than 1,25,000 primary patients in rural



Kosish - The Hospice

Jharkhand and West Bengal. The hospice, which has 15 beds, provides pain relief and addresses concerns of the body, mind, and spirit. Their medics, nurses and volunteers provide home care to more than 500 patients in villages within a 300-km radius. And preventive palliation and free health check-ups are conducted for rural elders.

They tackle the concerns of caregivers as well, including providing bereavement support. When family members care for terminally-ill patients, it makes a big difference to the dying person’s morale.

Patient referrals are made from the department of palliative medicine from other hospitals in Mumbai, Vellore, and from cancer medical centres in Ranchi and Kolkata.

The OPD sees 80-100 patients every week. Concerns around ante-natal care, skin diseases, gynaecological and infertility problems and respiratory illnesses are addressed here as well, adds Dr Dam.

Interestingly, Kosish also has several outreach programmes to create awareness about hygiene, nutrition, and health in the local communities. These include training young women in nutrition and hygiene, health workers to make home visits and provide vocational training to women to make them financially self-reliant. Calcium supplements and *sattu*, the protein-rich flour for wholesome nutrition, are given to the elderly to prevent osteoarthritis. Since 2015, the NGO has also been feeding more than 50 village children every day, thanks to contributions from donors.

The hospice also runs a Palliative Nursing Aides Programme, which is an important initiative that seeks to empower women at the grassroots level, says Dr Dam. Young women stay in the hospice during the training that lasts for six months. They are taught to check blood pressure, give advice on stroke prevention, osteoarthritis, and chronic pain. These women are provided cycles to go around 25 villages and chat with the elderly to check if they are suffering from abuse and neglect.

“Bedridden widows, especially, remain grossly deprived owing to the local cultural milieu. And, we have noticed that

The concept of end-of-life care, which is not understood by many in India, prioritises the mental and physical comfort of the suffering patient above all else



Dr Abhijit Dam: Committed to palliative care

women are more acceptable to the community in their work as palliative and geriatric aides. In fact, the villagers now look up to these women,” Dr Dam points out. The nursing aides are given training in *varmam* therapy to provide pain relief.

The team at Kosish understand the importance of religion and spirituality as one’s life draws to a close. They provide patients, if they so desire, and their caregivers the chance to undergo ritualistic practices such as *Kalavahana* – a powerful healing ritual – and *phowa* – a practice in Hinduism and Buddhism that means transferring consciousness at the time of death. These practices transcend the *bardo* – a state of existence between death and rebirth – according to Tibetan philosophy.

The hospice also runs a course to train death doulas – the first of its kind in India—called *Farishtey*. Traditionally, doulas help mothers during pregnancy and childbirth. Death doulas or death midwives provide emotional and spiritual support to dying people and their near and dear ones.

“Once, a lady with bilateral, advanced breast cancer approached me. She used to be principal of a college in Bokaro. She was not even able to write when she approached me. Her



Feeding village children is one of Kosish’s initiatives

Kosish also runs a course to train death doulas – the first of its kind in India – called *Farishtey*. Death doulas or death midwives provide emotional and spiritual support to dying people and their near and dear ones

plea to me was to provide her with some relief so that she could at least write her will. After some days with Kosish, she was able to stand up and walk to the washroom on her own. She even went to her college. Her last few hours were guided with spiritual practices by death doulas,” shares Dr Dam.

“The only thing for sure in life is death. It is a paradox that we invest so much in valuables but we do not invest in death. Everything cannot be explained by science. Sometimes, compassion can be more effective than medicine and science,” says Dr Dam, who has also undergone training in alternative medicine such as *siddha* in Chennai.

The author of books such as *Wading through Quicksand: Palliative Care, Spirituality & Sanatan Dharma* and *For thou Art a Hero: Believe it*, Dr Dam has also completed his PhD by researching on end-of-life dreams and visions in rural India. He credits his mother – who refused chemotherapy for her colon cancer and eventually passed away at home – and his medic father, for instilling the missionary zeal in him.

As death approaches, it is Dr Dam and his palliative care team that offer some reprieve to the dying and guide them to move on gently in their last journey. ■

Dr Dam co-founded Kosish, an NGO that provides palliative care services for the terminally ill disadvantaged people in rural Jharkhand and West Bengal, way back in 2005

Aurangabad Caves:

A Tale Time Forgot



Lesser known than the nearby famous Ajanta and Ellora, the 12 rock-cut Buddhist caves of Aurangabad are an experience. The Buddhist cave complex is made up of an intricately carved vihara, which provides an panoramic view of the city. It is truly like a teardrop on a basalt rock on the periphery of the Sihaychal Hills

Mallik Thatipalli

A pair of noisy parakeets are our only company as we make our way up the steep slope of the Aurangabad Caves, located just outside the city of Aurangabad. It is early February but the sun is shining and the lack of tourists seem both welcome and a bit disconcerting at the same time, especially when one is used to the maddening crowds in tourist spots.

Built between 2nd and 7th century, the 12 caves of Aurangabad, which represent a stunning confluence of styles, were used as viharas or monasteries by monks and includes a shrine as well. These caves have literally

been dug out of comparatively soft basalt rock.

As with popular Buddhist art, the carvings and paintings here too portray Bodhisattvas. Unlike the Ajanta or Ellora caves, the excavations here are not as extensive because of the threat of damage to this heterogeneous rock formation.

Though the Aurangabad Caves are less popular than the UNESCO sites in the vicinity, they nevertheless retain a charm and identity of their own. The beauty and workmanship on display, the sheer magic that has been achieved by primitive tools and the stories the sculptures tell, all make it a worthwhile trip.

History of the caves

The Buddhists were the first to make cave temples. Usually, the caves primarily feature two structural forms, the chaitya-hall – a place of worship, and the vihara, the monastery, a place of residence for monks. The chaitya-hall has a vaulted roof and its entrance is topped by a large window shaped like the horse-shoe. It has a

Built between 2nd and 7th century, the 12 caves of Aurangabad, which represent a stunning confluence of styles, were used as viharas or monasteries by monks and includes a shrine as well

central nave, side-aisles and a shrine or image-chamber.

The vihara has a large hall for congregation and residential cells on three sides.

The Aurangabad cave temples too are largely rock-hewn adaptations of these two forms and they still stand tall having been carved from this time-defying material of rock. The excavation starts from the western end of the hill.

The caves were hewn at a height of nearly 70 feet from the ground level. The rock formation situated on a hill of the Sihaychal range is not entirely suitable for excavation. Hence, at many places the rock surfaces have collapsed and developed cracks and is also the reason many caves have been unfinished. However, the excavators, it seems, also took great care to avoid the faulty and loose rock mass.

In all, the 12 Buddhist Caves (1 chaitya-griha and 2 viharas) have been excavated from the soft basalt rock and fall into three separate groups. The first group consists of caves 1 to 5; the second from 6 to 9 located to the east of the first group at a distance of nearly 500 m; and third from 10 to 12, which are plain and unfinished cells 1 km further east of the second group.

Themes and motifs

The caves of Aurangabad are rich in style. Each cave has an arresting feature, be it a Buddha form, intricately carved pillars or elaborate carvings. For example, Cave 1 has a Buddha seated on a lotus seat supported by Nagas with their spell-binding snake-hoods. Nagas, demi-gods who brought rain, were depicted in Buddhist art with a crown encircled by snake-heads.

The seventh century Cave 2, however, has features borrowed from Hindu temples. An enormous seated Buddha occupies the shrine, his feet on a lotus, his hands folded in a preaching pose, and over his shoulders are carvings of celestial beings.

Cave 7 is perhaps the best example of these caves with a colossal figure of the Bodhisattva Padmapani. Scenes from Buddhist prayers are found on the walls, and the figure of Saraswati, the goddess of learning, which clearly emphasise the influence of Hinduism on these caves.

On the ceiling, there are gandharvas, celestial musicians and nymphs of heaven, with offering in their hands, while lions, snakes and elephants adorn other places. In other caves, the artists compete with each other to create surprisingly neat and



Each cave has an arresting feature, be it a Buddha form, intricately carved pillars or elaborate carvings



organised designs of fretwork, scrolls, a panel of couples, tassels, flowers, geometrical designs, which reflect complete perfection.

Modern day relevance

As mentioned earlier, some of these caves are unfinished but they don't detract from the quiet charm that pervades the entire cave complex. It features work of both the Mahayana and Hinayana periods of Buddhism. Overshadowed by the Ajanta and Ellora, the lack of tourists in the Aurangabad Caves means that there is no rush to take photographs, no elbowing for the best spots and most importantly, there is no harassment from touts.

Though the Aurangabad Caves are less popular than the UNESCO sites in the vicinity, they nevertheless retain a charm and identity of their own

What makes this cave complex also important is the blend of other styles such as Jainism and Hinduism, which makes it unique.

Travel is as much for seeking refuge from the daily rigours, as it is to give the soul a respite from the daily grind. As the sun sets, wandering through the caves and marvelling over these treasures from the past, make one deeply contemplative. The place seems ideal for some soul-searching moments.

The parakeets have long disappeared as we settle on the rock to soak in the magnificent vistas the hillock offers. There is a group of noisy children who are celebrating a birthday while a couple seeks solace in a selfie.

For our part, we remain content and thankful for this oasis which is enveloped in an atmosphere of peace and calm. It is indeed a beautiful and equally an invigorating experience to be able to bask in all this serenity under the benevolent gaze of the Bodhisattvas. ■



Featuring work of both the Mahayana and Hinayana periods of Buddhism, some of these caves are unfinished but that does not detract from the quiet charm that pervades the entire cave complex

Why breastfeeding is important

World Breastfeeding Week is celebrated every year from August 1 to 7 in more than 170 countries to encourage breastfeeding and improve baby health. **Dr Raghu Ram**, in his quarterly column, talks about the advantages of breastfeeding to both mother and the child, and breaks down some myths around it



Just over 20 years ago, in 2002, the World Health Organisation and United Nations Children's Fund jointly developed and launched a global strategy for infant and young child feeding. The theme for 2023 edition of Breastfeeding Week was: 'Let's make breastfeeding and work, work!'

What are the issues?

World over, more than half a billion working women are not given basic maternity provisions and find themselves unsupported when they return to work.

WBW2023 focused on breastfeeding and employment/work. It showcased the impact of paid leave, workplace support and emerging parenting norms on breastfeeding through the lens of parents themselves. Target audiences including governments, policy-makers, workplaces, communities and parents were engaged to play their critical roles in empowering families and sustaining breastfeeding-friendly environments in the post-pandemic work life.

The COVID-19 pandemic adversely affected child-bearing women by increasing the risk of unemployment and livelihood loss, and by disrupting access to prenatal, postnatal and further breastfeeding support and services in the healthcare system. We need to take into account the lessons learnt during the pandemic

and update parental social protection policies that will address the current situation.

The best way

Breastfeeding is the best way to provide new-borns with nutrients they need. WHO recommends exclusive breastfeeding until a baby is six months old, and continued breastfeeding with additional nutritious complementary foods for up to two years or beyond.

Advantages to the baby

- Breast milk is the healthiest form of milk for babies. The colostrum (a yellow, watery pre-milk) that breasts make during the first few days after birth helps in development and functioning of the baby's digestive system
- Breast milk is easily digestible and breast-fed babies tend to have less constipation and fewer feeding problems compared to bottle feed
- There is evidence that fatty acids in breast milk help develop the baby's brain. Breast-fed babies are at lower risk of infections, diarrhoea, asthma, obesity, allergies, and colic
- The antibodies in the breast milk develop baby's immunity as well, which is responsible to fight sickness



- Breast-fed babies have a significantly lower risk of a condition referred to as sudden infant death syndrome (SIDS), where typically the infant is found dead after having been put to bed

Advantages to the mother

- Breastfeeding helps create a unique emotional bond between mother and baby
- It is always available and is cheaper compared to bottle feed
- There is evidence to suggest breastfeeding helps reduce post-delivery depression
- Breastfeeding releases a hormone oxytocin which helps uterus contract and return to its normal size more quickly and thus helps in reducing excessive bleeding after delivery
- It helps lose weight faster
- Breastfeeding reduces risk of developing breast cancer and evidence is accumulating to suggest breastfeeding helps reduce risk of developing uterine and ovarian cancer
- Equally, there is evidence breastfeeding helps reduce post-delivery depression

Breastfeeding contributes to the survival, health and well-being of the child and the mother. The powers that be must do everything possible to protect, promote and support this fundamental healthcare need.

World Breastfeeding Week 2023
focused on breastfeeding and
employment/work. It showcased
the impact of paid leave, workplace
support and emerging parenting norms
on breastfeeding through the lens of
parents themselves

Some myths decoded

- There is a misconception that breast cancer does not occur during pregnancy and lactation. But, it can happen and so being 'breast aware' absolutely important even during pregnancy and lactation. Should there be any new changes, a specialist consultation is essential to rule out any abnormality.
- There is no evidence to suggest breast cancer is transmitted through the mother's milk. However, a mother while receiving chemotherapy should not breastfeed, as the drugs can harm the baby.

- Breastfeeding is also not recommended during the active phase of tuberculosis because the infection can be passed onto the baby. Harmful effects of some medicines taken by the mother can be transmitted through breast milk. It is always advisable to check with the doctor before breastfeeding. Women taking drugs are advised not to breastfeed.
- Many women believe that breastfeeding should be stopped when there is a breast infection (*lactation induced mastitis*). However, breastfeeding should not be stopped when there is breast infection (mastitis). In fact, breastfeeding keeps the ducts patent (open) and may help improve breast infection.

It is important to see a specialist as soon as there are signs of breast infection. Antibiotics are initially used to control the infection. If an abscess has developed, surgery (incision and drainage of abscess) is not the first treatment of choice. An ultrasound guided aspiration of abscess should be attempted, which can be repeated at short intervals until the pus has been completely aspirated. Only after all the conservative measures fail and signs of infection persist, a formal incision and drainage of abscess should be the last resort to evacuate the pus.

- It is true that screening mammograms (i.e., X-ray of the breasts for asymptomatic women to detect early impalpable breast cancer) should not be done during pregnancy and lactation. Although, the radiation dose from a mammogram is small (equivalent to a dental X-ray), it is best to avoid radiation exposure to the foetus or infant.
- According to WHO recommendations released in 2009, in low and middle-income countries, HIV positive mothers can breastfeed provided they commence taking antiretroviral therapy (ARVT) from the 14th week of pregnancy. This is to prevent mother to child transmission of HIV.

This therapy must be continued till the end of breastfeeding. WHO recommends that mothers known to be HIV positive should exclusively breastfeed their infants until six months of age, introducing appropriate complimentary foods thereafter and continue breastfeeding for the first 12 months of life.

The clear message is that breast feeding is a good option for every baby including HIV-positive mothers, when they have access to ARVT. ■

UBF

Diary

May 2023



**Dr Tamilisai Soundararajan** 
@DrTamilisaiGuv

Dr.Raghu Ram Pillarisetti, Founder & Director, Ushalakshmi [#BreastCancer](#) Foundation, [#Hyderabad](#) called on at Rajbhavan, [#Hyderabad](#) and Presented the First Print Copy of the 33rd quarterly issue of PINK CONNEXION Book (May - July 2023) .



 PMO India and 9 others

10:25 PM · 27/05/23 from Earth · **2,446** Views

Dr Raghu Ram, founder director of UBF called on Tamilisai Soundararajan, governor of Telangana and Puducherry at the Raj Bhavan and presented the May 2023 edition of Pink Connexion to her. The governor, who tweeted about the visit, features in the cover story of the issue



Dr Raghu Ram was invited by British deputy high commission to meet with Lord Tariq Ahmad of Wimbledon (UK minister of state for the Middle East, south Asia and United Nations) on May 30 in Hyderabad. The minister was on a four-day visit to India focusing on strengthening collaboration in areas of science and technology

Chief Guest at the 2023 Business Excellence awards



Mrs Indira Dutt felicitating Dr Raghu Ram



Deepa Venkat honoured with Business Excellence award



Kavita Dutt being felicitated



Standing ovation after Dr Raghu Ram's address



Bharathi Reddy honoured with the Business Excellence award

Dr Raghu Ram was the chief guest at the 2023 edition of the 'Business Excellence Awards' hosted by Andhra Chamber of Commerce in Chennai. Indira Dutt, the longest serving president of this organisation felicitated Dr Raghu Ram for his outstanding service to the nation at the event.

Established in 1928, the Andhra Chamber of Commerce is celebrating 95 eventful years promoting and protecting trade/industry in Tamil Nadu, Telangana, Andhra Pradesh and beyond.

Two outstanding women were conferred with "Business Excellence awards" at the event - Deepa Venkat, managing trustee, Swarna Bharat Trust and Bharathi Reddy, managing trustee /CEO, Vijaya group of hospitals. Kavitha Dutt was felicitated on being appointed honorary consul general for Vietnam in Chennai

Dr Raghu Ram received a standing ovation for his address on his journey of 17 years actively involved in promoting breast healthcare in India. Several prominent industry leaders in Tamil Nadu congratulated him - some with tears in their eyes - saying that they had not heard such a moving and heart-warming presentation!

Address to GI surgeons gathering



Dr Raghu Ram was the only non-gastrointestinal surgeon to have been invited to address a gathering of GI Surgeons at a meeting organised by Dr Pravin Suryavanshi at MGM Medical College & Hospital in Aurangabad on June 19, 2023. Dr Raghu Ram spoke on "Communication in Medicine - Have we got it right? How do we get it right?"

High honour: American Surgical Association to bestow an honorary fellowship



Dr Raghu Ram will be conferred with an honorary fellowship by the American Surgical Association during their 144th annual Congress, slated to be held in Washington DC, in April 2024.

Whilst congratulating him, Prof Mary Hawne, secretary - American Surgical Association & Chair, department of surgery at Stanford University said in a letter dated June 14 that this is the 'highest recognition' the ASA can bestow upon a surgical colleague from a foreign country.

Only 99 surgeons have been bestowed with this high honour in 144 years, she added.

Founded in 1880, ASA is the oldest and the most prestigious surgical organisation in America. Its members include the nation's most prominent surgeons from the country's leading academic medical institutions, many of whom are Chairs of the departments of surgery at these institutions.



AMERICAN SURGICAL ASSOCIATION

June 14, 2023

Raghu Ram Pillariseti, OBE, MBBS, MS
KIMS-USHALAKSHMI Centre for Breast Diseases
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Email: p.raghuram@hotmail.com

Dear Professor Pillariseti:

It gives me great pleasure to inform you that the Council of the American Surgical Association (ASA) has unanimously voted to elect you to Honorary Fellowship. This is the highest recognition that the ASA can bestow upon a surgical colleague from a foreign country. At present, there are 99 Honorary Fellows from throughout the world. Dr. Steven C. Stein joins me and the membership in sending you our congratulations. A brief history of the Association is available on the ASA website.

American Surgical Association

The oldest surgical association in the United States
Established in 1880

Mission Statement

As a premier academic surgical society, the American Surgical Association strives for excellence and leadership in science, education, and patient care while promoting diversity, integrity, and innovation.

History

The American Surgical Association was founded in 1880 and is the nation's oldest and most prestigious surgical organization. Its members include the nation's most prominent surgeons from the country's leading academic medical institutions, many of whom are Chairs of the Departments of Surgery at these institutions. Membership also includes leading surgeons from around the world, making it much more than an American association.

Taking breast health issues to college campuses



Dr Raghu Ram delivering his presentation



Governor addressing the gathering

Dr Raghu Ram was invited by Tamilisai Soundararajan, governor of Telangana and Puducherry, to attend a meeting held on June 26 at the Raj Bhavan, with the vice-chancellors of all the universities in Telangana.

What was important about this interaction is that after Dr Raghu Ram outlined the importance of early detection of breast cancer, the governor then requested the vice-chancellors to arrange 'Breast Health' awareness sessions in their respective university campuses.

The aim is to demystify the common myths around breast cancer and highlight the evidence-based facts linked to different breast health issues. All of which will be explained in a simple, easy-to-understand format. The ultimate goal is then for these 'empowered students' in colleges to become ambassadors of breast cancer awareness campaigns and spread the message of 'early detection' to their mothers, grandmothers, aunts, friends and the community at large.

A first in the Telugu States

Mike McKirdy, president, The Royal College of Physicians & Surgeons of Glasgow (RCPSG) accepted Dr Raghu Ram's invitation to visit Hyderabad. This is the first time the college's president was visiting the Telugu states in their over 400-year-old history.

During his visit, McKirdy addressed consultants and trainees across all specialties at KIMS Hospitals, NIMS & Basavatarakam Indo American Cancer Centre.

In his role as International Advisor for RCPSG, Dr Raghu Ram has been providing strategic guidance to the college, and equally, serving as a bridge to facilitate trainees and consultants across medical and surgical specialties in India to pursue their goals in the UK.

Founded in 1599, RCPSG is the only multi-disciplinary Royal College in the British Isles that represents a diverse community of surgeons, physicians, dentists from across 97 countries around the world.



Dr Bhaskar Rao, CMD KIMS Hospitals felicitating Mike McKirdy



Dr Raghu Ram with Dr Karunakar Reddy, Vice Chancellor, KNR University of Health Sciences and Mike McKirdy



Mike McKirdy and his spouse, Dr Anne Marie with Dr Raghu Ram's family



Mike McKirdy addressing the gathering at KIMS Hospitals

Tribute: Dr Kotha Ushalakshmi



Dr Kotha Ushalakshmi turned 90 on July 21. She has successfully completed 90 positively eventful years with utmost commitment to her Family, extraordinary dedication to her Profession and has served as a major inspiration to a one of its kind Breast Cancer advocacy Campaign in Telangana & Andhra Pradesh spearheaded by a Foundation, which bears her name.

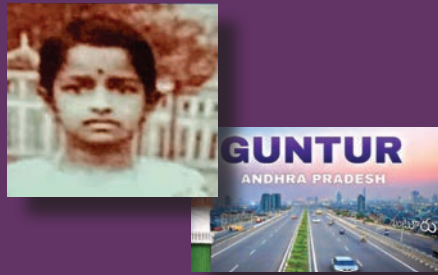
The eventful journey of this well-known gynaecologist in the Telugu states, is chronicled in a short film, *The Indomitable Dr Kotha Ushalakshmi @ 90*. Her tryst with breast cancer transformed her son, Dr Raghu Ram's life, who has committed himself for a lifetime to improve the delivery of breast healthcare in India.

Truly, the greatest legacy that anyone can leave behind is to positively impact the lives of others'. Her glorious life well and truly epitomizes this statement.

A glimpse into her journey thus far can be found on this YouTube link given below:

 <https://youtu.be/oW8QgSP7Zx0>

Born 1933



MBBS and MD, DGO



Andhra Medical College,
Visakhapatnam



Defied parent's wishes and married her senior in Medical College



Served as Professor of Obstetrics & Gynaecology in undivided Andhra Pradesh for over a decade...

One of the most sought-after gynaecologists of her generation...

2002 - Everyone has a Story



Her 'big' story began when she was diagnosed with Breast Cancer

She fought the disease with courage & determination



2007



Son and daughter-in-law leave lucrative career opportunities in the UK to relocate to Bharat to take care of Amma



2007 - 2023



Ushalakshmi Breast Cancer Foundation, Hyderabad, India

Creating awareness
Reaching out to the Community
Supporting breast cancer 'Conquerors'

Empowering Women...
Impacting Lives...



KIMS Hospitals has honoured Dr Ushalakshmi

South Asia's first purpose built comprehensive Breast Centre

Bringing about a revolutionary change in the way 'Breast Health Centre' is understood in the Indian subcontinent

The Association of Breast Surgeons of India (ABSI), the 'voice' that represents surgeons practising breast surgery in India has instituted an annual **Dr Ushalakshmi Oration** to honour her extraordinary contribution to breast cancer advocacy

At ABSICON 2023 - Ahmedabad

Harmala Gupta delivers second edition of 'Dr Ushalakshmi Oration'

Dr Raghu Ram presents a 'surgeon-friendly' technique to address screen detected breast cancers



**Insertion of guide wire for impalpable lesions -
is it a surgeon's domain?**

Harmala Gupta, a cancer conqueror delivered the second edition of the Dr Ushalakshmi Oration during ABSICON 2023. She spoke about her journey, her fight against cancer and the pioneering cancer support services that she has been spearheading in India, under the auspices of India's first cancer support group that she had established in 1990.

Meanwhile, Dr Raghu Ram shared his experience of a 'surgeon-friendly' technique of inserting guide wire for screen detected impalpable breast cancers/impalpable indeterminate breast lesions at the 11th annual Congress of The Association of Breast Surgeons of India (ABSI). The novel technique involves surgeon inserting the guide wire which has numerous advantages, as opposed to the long established tradition of radiologist undertaking this procedure.

He however underscored the importance of surgeon and radiologist working seamlessly as a team to precisely identify the impalpable lesion prior to surgery and ensuring completeness of excision after surgery. This talk generated keen interest, discussion and appreciation..

He also presented the audited accounts of the landmark 10th annual Congress of ABSI that he hosted in Hyderabad in 2022. An amount of Rs 26 lakhs was contributed to the parent body, ABSI, which is incidentally the highest-ever contribution in its 11-year history.



Harmala Gupta with ABSI principal office bearers and Dr Raghu Ram



Ushalakshmi Breast Cancer Foundation

Hyderabad, India

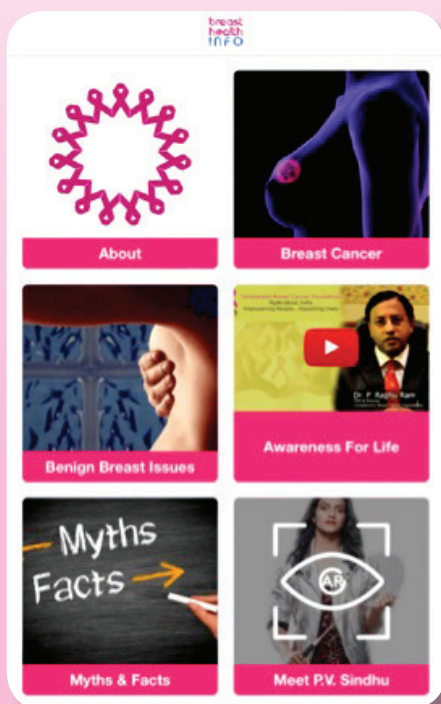
Empowering people...impacting lives

www.ubf.org.in

World's first mobile app on breast health in 12 languages

(English, Hindi, Telugu, Tamil, Kannada, Malayalam, Gujarati, Punjabi, Bengali, Marathi, Oriya & Assamese).

‘ABCs OF BREAST HEALTH’



Launched by Mr Amitabh Bachchan (2017)

An initiative of the Ushalakshmi Breast Cancer Foundation

LINKS FOR FREE DOWNLOAD

App store

<https://apps.apple.com/us/app/abcs-of-breast-health/id1482487468>

Google play store

<https://play.google.com/store/apps/details?id=devatech.kims.avantari>

